IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of	Atty	BJS-1487-28				
	Dkt.	C#	M#	Attachments:		
PLOUËT et al.	TC/A.U.	1647		(1) Amendment & Annex		. i.e i
Serial No. 10/566,679	Examiner:	Locka	(2) IDS, PTO-1449 Form & cit ockard Kim et al and Norrby refere			
Filed: August 14, 2006	Date:	September 29, 2008		and		
Title: NOVEL ANTI-ANGIOGENIC AGENT AND ITS USE, IN PARTICULAR WITHIN THE FRAMEWORK OF THE TREATMENT OF CANCER (3) Three (3) Replacement Sheets (1/6, 2/6 and 3/6)						
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						
Sir:						
RESPONSE/AMENDMENT/LETTER This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.						
☐ Correspondence Address Inc	dication Forn	n Atta	ched.			
Fees are attached as calculated below: Total effective claims after amendment previously paid for 20 (at least		highest	t number 00 \$0	0.00 (1202)/\$0.00 (2202)	\$	
Independent claims after amendment previously paid for 4 (at least 3		highest x \$210	t number .00	0.00 (1201)/\$0.00 (2201)	\$	
If proper multiple dependent claims now a	ndded for first tin	ne, (ign		0 (4000)\D40= 00 (0000)		
Petition is hereby made to extend the currepaper and attachment(s)	One Two M Three M Four	Month Month E Month Ex Month	cover the filing date Extension \$120.00 xtensions \$460.00 ktensions \$1050.00 Extensions \$1640.0	0 (1203)/\$185.00 (2203) of this 0 (1251)/\$60.00 (2251) (1252)/\$230.00 (2252) 0 (1253/\$525.00 (2253) 00 (1254/\$820.00 (2254) 0 (1255/\$1115.00 (2255)		120.00
Terminal disclaimer enclosed, add			\$130.0	0 (1814)/ \$65.00 (2814)	\$	
☐ Applicant claims "small entity" status.	☐ Statemer	nt filed h	nerewith			
Rule 56 Information Disclosure Statement Filing Fee \$180.00 (1806)					\$	180.00
Assignment Recording Fee Other:				\$40.00 (8021)	\$ \$	0.00 0.00
	TOTAL F	EE PA	ID ELECTRONICA	LLY BY CREDIT CARD	\$	300.00
CREDIT CARD PAYMENT FORM ATTACHED.						
The Commissioner is hereby authorized to charge any <u>deficiency</u> , or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.						
901 North Glebe Road, 11 th Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000 Facsimile: (703) 816-4100		NIXON & VANDERHYE P.C. By Atty: B. J. Sadoff, Reg. No. 36,663				
BJS:pp	Sigr	nature:		/B. J. Sadoff/		